



Pennsylvania Accreditation Center

PAC Assessors Guidance Handbook

PAC-G-01

Ver 1.0: 6/2021

Assessors Guidance Handbook

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Pennsylvania Accreditation Center

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PAC-G-01

Ver 1.0: 6/2021

HISTORY OF THE DOCUMENT

Version number	Reason(s) of revision	Scope of the revision
Ver 1.0:6/2019		



Pennsylvania Accreditation Center

PAC Assessors Guidance Handbook

PAC-G-01

Ver 1.0: 6/2021



1. PURPOSE

This guidance handbook is a consolidation of information for reference by assessors. It provides guidance for use by assessors and technical experts appointed by PAC to conduct assessments of conformity assessment bodies (CAB) for the purpose of accreditation. This handbook is aimed at enabling PAC Assessors and Technical Experts to carry out the assessment activities efficiently and effectively with the view to arriving at the same conclusions.

- This handbook also serves as a training tool that explains:
 - The responsibility of an assessor throughout the assessment process from preparation, conducting to reporting and follow up on assessments;
 - The processes and techniques involved in providing a thorough and well documented assessment report; and
 - The ethical conduct expected from PAC assessors.

2. SCOPE

The rules and guidelines presented in this document are applicable to assessment activities in all PAC accreditation schemes.

3. REFERENCES

ISO/IEC 17011:2017	Conformity assessment — Requirements for accreditation bodies accrediting conformity assessment bodies
PAC-PR-08	PAC Accreditation Process
PAC-G-03	Guidelines for Addressing and Clearing Nonconformities

4. DEFINITIONS

The definitions in ISO/IEC 17025, ISO 15189, ISO/IEC 17020, ISO/IEC 17011 and ISO/IEC 17000 are applicable.

4.1. Appropriate

Suitable, fitting, or proper in a particular circumstance or for a particular purpose - It is therefore the responsibility of Assessors/Technical experts to apply their knowledge, expertise, experience and assessment skills to evaluate the suitability taking particular circumstance into consideration.

4.2. Preliminary visit

Prior to embarking on the formal accreditation process, laboratories that seek accreditation may voluntarily request PAC to conduct a pre-assessment. The purpose of the Pre-assessment is to evaluate the organization's



readiness for accreditation. The quality management system, the premises, the equipment and the competence of the personnel involved in the management system are evaluated during the pre-assessment

4.3. Initial Assessment

Initial assessment is an onsite assessment at the applicant's premises and consists of an assessment of the organization's competence to perform specific tasks for which accreditation is sought. PAC assessors shall be able to evaluate the functionality of the applicant's quality management system, examine if all requirements are fulfilled, assess the implementation of the system and witness technical activities. The frequency and results of laboratories' and inspection bodies where relevant participation to Proficiency Testing (PT) schemes or Inter laboratory Comparisons (ILCs) are reviewed. Refer PAC-PO-03: Proficiency Testing and other Comparison Program. The expert shall witness tests analysis or verification.

4.4. Accreditation program and accreditation cycle

After granting accreditation PAC shall undertake periodical Assessments to the applicant's premises in order to have confidence that the organization always fulfils the accreditation requirements. The first follow up assessment shall be undertaken approximately 6 months, but not more than twelve (12) months after the initial assessment. Thereafter assessment visits are scheduled annually throughout the accreditation cycle of three (3) years. The follow up assessment activities vary based on the experience of each organization. It can vary between assessment visits to document review of different aspects together with witnessing of tests, analysis, calibration, and certification or inspection bodies in their practical work. PAC is free to choose the activities to be witnessed.

PAC may conduct extraordinary assessments when it is considered necessary. The organization shall be informed of such assessments and the scope and reasons thereof.

4.5. Reassessment

An accreditation is valid for three (3) years provided all requirements are fulfilled during the period, the accreditation shall be renewed. The laboratory thereafter shall submit to PAC an application for accreditation renewal. The reassessment shall be a complete assessment covering the laboratory scope of accreditation and the results of Proficiency Testing/Inter laboratory Comparisons. The organization shall submit application forms and the quality manual. A review of the full documentation shall be undertaken prior to the on-site assessment.

4.6. Extension of Accreditation

An accredited laboratory can at any time apply for extension of its accreditation scope to PAC. Extensions of accreditation scope may be testing or calibration or examination or inspection of new methods, parameters or standard. PAC can assess the extension of accreditation scope at the same time as the surveillance assessment or



separately. The scheduled time shall be agreed with the applicant. If the application is received by PAC six (6) weeks before a scheduled visit, the application for extension shall be treated during the planned assessment visit.

4.7. Assessment Report

After each assessment, the Team Leader shall submit the assessment report to PAC within one (1) week after the assessment. The report shall include all inputs and recommendations from the assessment team.

4.8. Nonconformity

A nonconformity is defined as a non-fulfillment of the requirements.

4.9. Observation

An observation is defined as an opportunity for improvement or a case that may develop into nonconformity in the future but it is currently not a nonconformity.

5. RESPONSIBILITIES

This document provides guidelines that should be followed by all PAC personnel involved in the assessment process.

6. GUIDELINES

6.1 THE PURPOSE OF AN ASSESSMENT

The purpose of an assessment is to:

- Examine and evaluate the technical competence of a conformity assessment body (CAB) to perform calibrations, tests, medical tests, inspections, verifications, certifications and/or other services covered by their scope of accreditation;
- Evaluate whether the CAB's documented management system complies with the requirements of the relevant accreditation standard;
- Confirm that the operational and technical activities being performed by the CAB are technically valid, appropriate and conform to the CAB's documented management system;
- Seek confirmation that the quality system is appropriate to the organisation's needs, organisational arrangements and methods of operation including multiple location operations and number of staff members; and
- Establish whether a CAB satisfies PAC's and all relevant international requirements for accreditation. This information forms the basis for PAC's decision to grant, extend, suspend or withdraw accreditation.

6.2 ACCEPTING AN ASSESSMENT



PAC may contact an assessor/technical expert to ascertain their availability to conduct an assessment.

When accepting the assessment(s), Assessors/Technical Experts need to make sure that:

There is no conflict of interest:

- You may not accept an assessment if you have worked for or consulted with the CAB you have been asked to assess within 2 years before the assessment date.
- You may also not have or have had any relationship with the CAB or its personnel which could compromise the impartiality during the assessment process.

If you are not sure if there is anything that could be considered or perceived as conflict of interest, please contact the relevant PAC Accreditation Manager who will advise you accordingly.

You are able to assess the technical scope.

You will be selected as a Technical Assessor/Expert according to your specific expertise. This information is obtained from your CV and proof of qualifications that you have submitted to PAC. However, you will still need to advise PAC should there be anything in the scope that have been assigned to you that you are not able to or uncomfortable to assess.

In the event that you accept to participate in an assessment you are obliged to sign PAC-F-45 Declaration of Impartiality and Confidentiality for the assignment to be undertaken and for which availability has been confirmed.

6.3 PREPARING FOR AN ASSESSMENT

You should receive the assessment plan/briefing notification from the Team Leader at least 2 weeks before an assessment.

6.3.1 The briefing material includes:

Information on the purpose of the assessment; the date and starting times of the assessment; The address and contact details of the CAB;

- A draft schedule of accreditation;
- The proficiency testing (PT) programmes in which the CAB participates and results of its performance (where applicable);
- Details of the last assessment and scope covered; and
- Other specific instructions that the Team Leader may deem necessary.

6.3.2 Assessment criteria

The assessment criteria include:



- The accreditation standard (i.e., ISO/IEC 17025, ISO/IEC 17020 and ISO 15189)
- The accreditation requirements including PAC and ILAC requirements
- The management system documents of the CAB

6.3.3 To prepare for the assessment, you must:

- Review the briefing material as soon as you receive it so that enough time is available to obtain any further information that you may need;
- Examine the scope of the assessment and confirm that your expertise is appropriate to cover the scope;
- Refresh your knowledge of the relevant standards or test/ calibration/ examination/ inspection methods;
- Re-familiarize yourself with the accreditation requirements which include the applicable PAC documents (these are available on the PAC website).

6.4 ROLE OF TEAM LEADER

6.4.1 Document Review

Upon receipt of the organization's application for accreditation, the PAC Accreditation Manager will review the documents for completeness. If the documents are complete they shall be given to the appointed Team Leader who in turn shall undertake with the help of other assessment team members a document review of the CAB's quality manual and other relevant documents for compliance with the relevant standard as well as PAC requirements. The Team Leader shall compile a document review report on PAC-F-14 which shall be submitted to the applicant CAB through PAC accreditation manager. The report shall contain comments on any nonconformities, areas which are not addressed or where actions are needed, areas where there are concerns or weaknesses and a recommendation on the way forward. The CAB is asked to confirm receipt of this report by email to the file manager within 5 days. This email is considered equivalent to the signing the report.

The CAB shall be given up to 2 months to address the findings of the document review. Failure to address the findings within 2 months will result in the entire process being repeated should the CAB still be interested in seeking accreditation.

6.4.2 Pre-assessment (preliminary visit)

Although not mandatory a preliminary visit can be carried out, if required by the applicant organization. The preliminary visit is normally carried out by the Team Leader and takes a day.

The preliminary visit normally involves the following:

- a) Discussion of the findings related to documentation;
- b) Discussion of the accreditation requirements, the accreditation process, time limits;
- c) Discussion on costs associated with accreditation; and



d) Brief examination of the system which has been established and implemented.

After the preliminary visit the Team Leader shall submit a report on PAC-F-13 for to the PAC Accreditation Manager who in turn shall forward it to the applicant organization.

6.4.3 Assessment

The role of a Team Leader shall be to:

- Conduct opening and closing meetings using PAC-F-16 and PAC-F-23 ;
- Undertake the assessment using PAC-F-15 as assigned in the assessment plan;
- Ensure that nonconformities raised are reported on PAC-F-14;
- Manage the assessment team and ensure thoroughness and completeness of the assessment;
- Collate the findings raised and prepare a summary report containing recommendations on PAC-F-24
- Present the findings to the CAB's management and other representatives.

6.5 ROLE OF TECHNICAL ASSESSOR/EXPERT

6.5.1 Role of Technical Assessor/Expert

The role of a Technical Assessor/Expert shall be to:

- Undertake the assessment using PAC-F-15 as assigned in the assessment plan;
- Witness the laboratory's or inspection body's technical personnel undertaking calibrations/tests/ medical tests/ inspections within the scope of accreditation applied for and report on PAC-F-18.

The witnessing of a calibration/ test laboratory may include witnessing of activities carried out at customer site

- Carry out the vertical assessment of an activity which also includes checking the technical competence of personnel and report on PAC-F-19
- Assess the adequacy of qualifications, experience and competence of technical staff through interviews and review of CVs;
- Evaluate the suitability of equipment, range of use, the status of calibration of each equipment used, maintenance and labeling of equipment;
- Assess the appropriateness of the methods or procedures;
- Evaluate the suitability of the premises of the laboratory or inspection body for the scope applied for, check that the environmental parameters have been recorded and if the laboratory or inspection body has a system for following up on results of such measurements;
- Evaluate the results of internal quality control; and



- Evaluate the implementation of Metrological Traceability of measurement, participation in Proficiency Testing or other Inter Laboratory comparisons and elaborate in the assessment report.

The witnessing of a medical laboratory will cover the Pre-examination, examination and post-examination processes including sample collection sites and the transportation of samples to the medical laboratory

The witnessing of certification body will include witnessing auditors who are carrying certification audits on-site of the client;

- Carry out the witness assessment of an audit activity which also includes checking the technical competence of personnel and report on PAC-F-19
- Assess the adequacy of qualifications, experience and competence of technical staff through interviews and review of CVs;
- Evaluate the suitability of audit time, opening and closing meetings;
- Assess the appropriateness of the methods or procedures;
- Evaluate the knowledge of the auditors and expert to the assessed industrial codes;
- Evaluate the implementation of auditors for the requirements of the standards and procedures.
- The application of the auditors/experts knowledge and their performance attributes.

6.5.2 Role of Legal Technical Expert (if needed)

The role of a Legal Technical Expert shall be to:

- Interpret to the assessment team the requirements of the relevant applicable regulations; Check if the facility activities are carried out in accordance with the existing regulations;
- Witness an activity with the Technical Assessor and advise on the competency of personnel, methods, equipment, general risks requirements and the compliance with the applicable regulations; and
- Check and confirm if the facility reports which were presented to the assessment team during a vertical assessment were acceptable to the relevant regulatory authority.

6.6 CONDUCTING THE ASSESSMENT

The overall flow of assessments follows a consistent pattern involving the following sequential stages:

- a) Team briefing or Pre-opening meeting;
- b) Opening meeting;
- c) Evaluation of the technical competence of the CAB and examination of the implementation of the documented management system and its compliance with the relevant accreditation standard and other accreditation requirements;
- d) Pre-closing meeting or final team meeting; and
- e) Closing meeting



6.6.1 Team briefing/Pre-opening meeting

The intention of the team briefing is for the Team Leader to meet with the assessment team members before the opening meeting to confirm the assessment plan and confirm the respective roles of all team members. The team members shall once again sign PAC-F-45 Declaration of Impartiality and Confidentiality

6.6.2 Opening meeting

The opening meeting is a meeting chaired by the Team Leader and held between the assessment team and the CAB staff. The Team Leader will conduct the meeting following PAC-F-16 Onsite Assessment Opening Meeting Agenda.

The opening meeting agenda shall include:

- a) Introduction of the assessment team and the CAB's representative and an outline of the meeting agenda;
- b) Review of the purpose, scope and extent of the assessment;
- c) Confirmation of any changes with the organization since the last contact;
- d) Outline of the functions and responsibilities of each member of the assessment team;
- e) Review of the assessment procedure including areas/activities to be covered, and the assessment schedule;
- f) Confirmation of the resources and facilities required by the assessment team including confirmation of the representatives from the laboratory who will accompany the assessment team;
- g) Outline of the principle of confidentiality; and
- h) Answer/clarify any questions raised by the CAB's management representatives.

6.6.3 Evaluation of Technical Competence

Once the opening meeting is complete you will start with the assessment.

The assessment is conducted to confirm that activities within the scope of the accreditation are being executed competently at a technical level. It is important that Technical Assessors/Experts limit their activities to the work covered by the scope of the application/accreditation and the accreditation requirements and keep within the scope of assigned assessment tasks, including the agreed timetable throughout the assessment process.

The responsibility of Technical Assessors/Experts is to confirm the technical competence of the CAB to produce reliable results/reports. It must be established through objective evidence and by using techniques such as witnessing and vertical assessments, that:

The CAB has the necessary technical expertise, conducive environment, equipment and procedures and/or work instructions required for establishing their competence for the scope of work done as requested or covered in their schedule of accreditation;



All of the technical accreditation requirements as well as the requirements of the relevant standard have been appropriately addressed;

The CAB has implemented all the technical requirements of the management system to ensure valid results/data/reports are generated each and every day; and

The operational, administrative and technical procedures used to support the management system manual are complete, technically valid and appropriate.

For each function or activity, Technical Assessors/Experts would need to examine all the important features and assess (as applicable for the relevant accreditation standard) the following:

- a) Relevant documentation (including its currency);
- b) Appropriateness of methods and procedures;
- c) Suitability of equipment, machinery or instruments (including their calibration);
- d) Suitability of the environment and supporting services;
- e) Adequacy of personnel (number, training, skills, declaration of competence as bestowed on their staff by the organization etc.);
- f) Monitoring of processes/quality control measures;
- g) Handling and identification of samples, specimens, test items, calibration items or inspection items; and
- h) Recording and reporting of results.

6.6.4 Throughout the assessment

Each member of the assessment team will conduct their assessment as assigned by the Team Leader.

Technical Assessors/Experts must always:

Keep within the scope of their assigned assessment tasks, including the agreed timetable;

Collect and record specific evidence to support observations on the appropriate checklist or other relevant field/or program specific document including:

- For conforming situations, a note to this effect and the 'sample' size taken;
- For non-conforming situations, details such as 'what' was incorrect and the record/report/equipment identifiers;
- For observations, note any areas for improvement or positive feedback.
- Be objective and impartial in collection of this evidence;
- Be alert for indications of other evidence that might need to be probed; and
- Use the appropriate checklist or other relevant field/program record sheet to record observations/conclusions concerning tests or inspections witnessed in the course of the assessment.



The record of assessment(s) will be in the completion of the relevant witnessing and/or vertical assessment forms.

6.7 TECHNICAL REQUIREMENTS

Where appropriate, the following requirements are examined by the Technical Assessor/Expert under the guidance of the PAC Team Leader during an assessment.

6.7.1 Competency Aspects

As a routine aspect of every assessment, an appropriate range of calibrations/tests/medical tests/r inspections should be witnessed to ensure that:

- Staff are familiar with calibration/test/medical test/ inspection methods and are capable of carrying them out; Appropriate training and education has been provided;
- Staff are appropriately supervised and technical direction is provided. The level of supervision will depend on the education, level of competency and risk of the task being performed; and
- Staff understands calibration/test/medical test/ inspection principles and limitations according to their responsibility.

6.7.2 Controlled Environment e.g. Laboratories

For controlled environments you need to ensure that:

- Relevant monitoring equipment (e.g. Thermometers etc.) is appropriately located and calibrated;
- The potential for contamination or interference is minimized; The lighting provided is adequate;
- The ventilation is adequate;
- The benches areas are “fit for purpose”;
- The access to the CAB and storage areas is controlled; and the consumables/reagents are stored appropriately.

6.7.3 Management of equipment

The management of equipment must be reviewed to ensure that:

- The CAB has all the necessary equipment;
- The equipment is operating correctly and is maintained in good working order; The operating instructions are adequately documented and available;
- Staff are competent in the use of the equipment;



- Safeguards are in place to prevent accidental adjustments that could invalidate results; Equipment that is damaged or requiring calibration is kept out of use;
- Appropriate checks are done on borrowed equipment;
- All significant items of equipment are uniquely identified, and relevant records kept; and appropriate preventive maintenance programs are in place.

6.7.4 Calibration and Metrological Traceability

Where equipment has an effect on accuracy or validity of results, Technical Assessors/Experts must ensure that:

- The initial calibration, recalibrations and performance checks are appropriate; The calibration schedule includes all relevant equipment;
- The frequency of recalibrations and performance checks are appropriate;
- The Metrological Traceability of reference standards and equipment involving physical measurements is appropriate.

refer to PAC-PO-04 PAC Policy on Metrological Traceability of Measurement

6.7.5 Reference materials and metrological traceability

- It is important to ensure that (where applicable) reference materials used are:
- Identified appropriately;
- Traceable to national/international standards of measurement or to national/international standard reference materials (where possible); refer to PAC-PO-04 PAC Policy on Metrological Traceability of Measurement and
- Stored correctly.

6.7.6 In-house calibrations and performance checks

In-house calibrations and performance checks are reviewed to ensure that:

- They are carried out by trained staff;
- They are appropriately documented; and They are recorded accurately; and
- They meet the requirements of PAC-PO-04 PAC Policy on Metrological Traceability of Measurement

6.7.7 Method documentation and validation

All methods should be reviewed to ensure that:

They are documented clearly, in sufficient detail, suitable for a new staff member with basic training (or for the lowest level of experience of staff who will be involved);



- They are readily available and used by staff; and
- They have appropriate “document control”.
- Non-standard or in-house methods should be reviewed to ensure records of validation and suitability are adequate for the intended purpose.

6.7.8 Measurement Uncertainty

The method of calculating measurement uncertainty should be examined (if appropriate).

Refer to ILAC P14; ILAC Policy for Uncertainty in Calibration

6.7.9 Document control of methods

Test / Calibration/ examination/ inspection methods are examined to ensure that:

- A formal mechanism to update national/international standard methods is in place;
- Only current versions of methods are in use (unless superseded methods are required legally or by a contract);
- Extracts from methods are under document control;
- No unauthorized amendments are made to methods; and there are no obsolete copies of methods in use.

6.7.10 Sampling and handling of test/calibration/inspection items (or samples)

Sampling techniques are examined to ensure that:

- Documented procedures are available to staff at the sampling location; Sampling is statistical valid (if appropriate);
- Staff is adequately trained; and adequate records are kept.

Sample identification is reviewed to ensure that:

- Identification is unique and traceable for each sample; Identification is legible and permanently applied;
- Identification is linked to records;
- Where relevant, a procedure is in place for sub-sampling and the identification of sub-samples is appropriate; and
- Where samples are unsuitable for testing or identification is in doubt, the customer is contacted.
- For medical laboratory, a pre-examination procedure is in place and implemented.

Sample handling is examined to ensure that:



- Sample receipt registration, preparation and disposal is carried out as per procedure; Procedures are in place to prevent deterioration of test/ calibration/ inspection items or medical samples;
- If preconditioning or storage under specific conditions is required, conditions are monitored and records are kept.

6.7.11 Monitoring the validity and reliability of test/ examination/ calibration results

Records of external monitoring (quality assurance) are reviewed to ensure that:

The CAB participates in all appropriate proficiency testing programs (for calibration activities, the laboratory's performance in a measurement audit carried out just prior to the assessment is reviewed if there is a need for a measurement audit);

- The corrective actions are carried out where necessary.
- Records of internal monitoring (quality control) are reviewed to ensure that:
- The 'internal quality control' program covers all accredited scope and involves all relevant staff;
- Tests/ medical tests /calibrations are monitored using replicate testing/ examination/ calibration by the same or different operators or different equipment; Results are reviewed and corrective actions are carried out where necessary; Statistical techniques are applied correctly;
- Infrequently performed activities are performed routinely to maintain competence; The performance of equipment is monitored appropriately.
- The results are not reported to the customer when quality control values are out of the predefined criteria.

6.7.12 Records and reports

6.7.12.1 Records are examined to ensure:

Ensure that all steps are carried out in the correct sequence including requests, sample registrations and raw data; and Copies of all records and documents are retained.

6.7.12.2 Test/medical test/ calibration /Inspection records are examined to ensure:

- Sufficient information is recorded to allow critical review of the results; They are legible and are of a permanent nature;
- Corrections to errors are authorised;
- They are securely stored for a defined period, protected against loss or deterioration, and confidentiality is maintained;
- The integrity of data capture and transfer in computer-controlled equipment; The validation of computer software;
- Appropriate evidence of checking calculations and data transfers;



- They contain the content as required by the relevant accreditation standard (for example, ISO/IEC 17025, ISO/IEC 17020 and ISO 15189), the relevant field application document and the test/ medical test/calibration/inspection method;
- Any variations to methods are clearly noted; Sub-contracted results are clearly identified (in case of medical laboratory, results carried out by referral laboratory are clearly identified);
- No interpretive comments have been made unless exempted by PAC; Appropriate use of PAC' accreditation symbol and endorsement;
- Integrity and confidentiality is maintained when transmitted electronically; and
- Where there is any doubt about the validity of issued results, the report is amended and the customer is notified.

6.7.13 Evaluation of Technical Staff

At all assessments you will routinely deal with CAB staff and their technical abilities. In addition, you may be required to investigate and assess their abilities as part of the assessment.

During the evaluation of technical staff, the CAB must provide you with evidence that they have evaluated and approved them as competent in their system. Your role will then be to confirm their competence, as declared by the CAB.

The concept of technical staff approval interviews varies between fields depending on policy and practice. This correlates with the availability of qualifications and on-going professional development criteria established and required by the relevant professional body. In some fields, it is a normal practice that the technician/technologist actually conducting the relevant tests/medical tests/ calibrations/ inspections. In such cases, the interview must be strongly focused on the individual under review. It is also important to interview the senior supervising professional staff.

You should interview them to confirm that:

- a) They understand significant issues in the calibration/ test/ medical test/ inspection, etc. processes;
- b) They are able to critically evaluate results;
- c) They take responsibility for the adequacy of results;
- d) They understand the requirements for accreditation and the scope of accreditation held/sought; and
- e) They understand PAC and the accreditation requirements.

A signatory interview is not a “closed book” knowledge exam. During the interview, you must encourage the candidate to freely demonstrate whatever their normal practice is, including referencing written procedures and records. This helps to demonstrate familiarity with the system in place as well as an understanding of the technical issues of significance.



The five points listed above may be covered at different times within the assessment process. It may be usual practice in some fields for the Team Leader to be involved in assessing the candidates' understanding of PAC and the accreditation requirements. However, all points need to be covered by the team at the conclusion of the assessment.

You will need to conduct either a witnessing assessment or vertical assessment for each applicant technical signatory and record sufficient objective evidence to support their qualifications, experience and competence, as well as to support your views on the suitability or not, as the case may be, of the candidate as a signatory.

At the pre-closing meeting, each assessor must be convinced by all tabled evidence that the candidate has the ability to critically evaluate and take technical responsibility for results reported within the scope of accreditation and approval requested. You must not be tempted to give an indication of the outcome until the situation has been discussed with the Team Leader.

You should interview the person responsible for all matters relating to accreditation/compliance of the organization at all times to confirm that he/she:

- a) Is familiar with and fully understands the requirements of the relevant standard or principles applicable to the organization's field of accreditation;
- b) Irrespective of other duties and responsibilities has a defined responsibility and the authority to ensure that the management system is implemented and followed at all times to support their proposed/current accreditation schedule;
- c) Has direct access to the highest level of management at which decisions regarding policy or resources are made;
- d) Has an in-depth knowledge of all PAC accreditation requirements applicable to the organization's field of accreditation; and
- e) Keeps PAC informed of changes.

6.7.14 Decisions on observations

Before confirming the observation as a condition for accreditation, you need to apply a two-fold test to the fact that:

A deficiency be expressed in words or phrases taken directly from PAC' accreditation requirements or from the CAB's management system or technical documents;

There was tangible evidence obtained in the form of specific observations or records which would support the claim (e.g. record/report number).

If both of these conditions have been met, the chances are that what has been identified is a valid condition.

6.7.15 Recording Assessment Information



In recording assessment information, always remember to:

- a) Collect and record specific evidence to support your observations on the appropriate checklist(s) or document(s) including notes:
 - On conformity to specific requirements and the ‘sample’ size taken;
 - For nonconforming situations, details such as ‘what’ was incorrect and the record/report/equipment identifiers; and
 - For observations, any areas for improvement or positive feedback.
- b) Be objective and impartial in the collection of evidence;
- c) Be alert for indications of other evidence that might need to be probed;
- d) Use the appropriate checklist(s)/assessment forms to record observations/conclusions concerning activities witnessed in the course of the assessment.
- e) Record information whilst witnessing the performance of the work and viewing records, and do not leave to later in the day or after the assessment when it is not as fresh in your mind.
- f) Avoid ticks, “yes” and “no” answers. Your information must be sufficiently comprehensive to allow the Technical Committee (TC) to support your recommendation and to make a decision on the competence of the CAB.
- g) Where necessary, you may attach additional supporting documentation as evidence of non-compliance or otherwise.

6.7.16 Recording of findings

The findings may be nonconformities or observations raised against the standard requirements, PAC requirements and CAB own quality management documents during an assessment.

Record your own findings during the assessment as you encounter them by completing a separate PAC-F-14 “Nonconformity Report” for each observation.

Record only factual findings and be very clear as to what the problem was. Keep in mind that once you leave the assessment, the CAB personnel reading the finding must understand exactly what the finding was about, what was wrong and what it applies to. Reference to the specific clause of the relevant Standard or PAC accreditation documents for each finding is compulsory.

As each PAC-F-14 is completed, the CAB representative in that area must sign the form as evidence that he/she agrees that the finding raised is factual. However, you might come across cases where the CAB representative does not agree to acknowledge the findings and sign PAC-F-14. This will not invalidate the findings; however the Team Leader must be informed of this situation. The team Leader may need to comment about the finding in question in his report if not solved with the CAB.

6.7.17 Pre-closing Meeting



Pennsylvania Accreditation Center

PAC Assessors Guidance Handbook

PAC-G-01

Ver 1.0: 6/2021

Once the assessment is complete, the assessment team will meet with the Team Leader to summarize the conclusions and contribute to a coordinated view of the status of the organization. The Team Leader will use the information gathered to prepare the CAB Assessment Report on PAC-F-24 for presentation to the CAB's representatives.

The pre-closing meeting normally lasts between ½ and 1 hour. In this relatively short time that is available for this meeting, the assessment team must ensure that:

- a) All of the assessment documentation has been completed comprehensively and in detail, and duly signed and dated where required;
- b) The evidence recorded in support of the findings is tabled at this meeting;
- c) The scopes assessed must be marked off on the schedule of accreditation. This is done by initialling and dating each scope that you have assessed and indicating whether you have conducted a witnessing or vertical assessment;
- d) Each finding recorded on the PAC-F-14 must:
 - Be a non-blaming statement of fact, clearly worded.
 - Be supported by objective evidence.
 - Be directly related to a specific requirement for accreditation or a method/technique for which accreditation is currently held or sought.
 - Include a reference to the relevant clause of the applicable accreditation standard or requirement in which it is in contravention.
 - Has been signed by the relevant CAB representative.

Note: At this meeting, similar nonconformities raised by the same or different team members under a particular clause (e.g. Document Control) must be combined and raised as one nonconformity

6.7.18 Preparing the Assessment Report

The assessment report must contain only factual observations and information.

The assessment report is regarded as an essential element of the accreditation procedure.

It is intended to:

- provide adequate record of the evaluation and evidence of compliance of the accredited /applicant's practice with regard to accreditation requirements;
- allow:
 - the Accreditation Committee to make a decision on the case;
 - the applicant to raise remarks or eventually lodge an appeal based on objective facts;
 - team members in charge of the next visit to ensure adequate monitoring of the assessment findings



Pennsylvania Accreditation Center

PAC Assessors Guidance Handbook

PAC-G-01

Ver 1.0: 6/2021

The assessment report is a confidential document and must not be provided to third parties without written agreement of the assessed CAB, except for PAC authorities or within the context of an evaluation in relation with a multilateral agreement.

Care must be taken to avoid:

- Any provocative or emotive statements;
- Expressions of gratitude or any other sentiments relevant to the assessment; Unsubstantiated opinions; and
- Financial or legal commitments or implications.
- The Team Leader will need to prepare the CAB Assessment Report [PAC-F-24] with the guidance and assistance of the Technical Assessor. The report represents the views of the whole team that is committed to support the general decisions. It is the responsibility of the team leader to look for the consistency of the different parts of the report and of the findings. In some cases the Technical Assessor may be required to conduct an assessment without a Team Leader, in which case the Technical Assessor will be required to complete this form. This includes:
 - Making decisions on the classification of nonconformities;
 - Reviewing all other assessment findings to ensure that the facility meets the necessary accreditation requirements; and
 - Considering the outcome of the assessment and agreeing on a recommendation.
- The CAB Assessment Report [PAC-F-24] must be completed in full and must include the following information:
 - The assessment team's recommendations with respect to the application for, or continuance of accreditation;
 - A conclusion with respect to the effectiveness of the organization's system, i.e. positive and negative feedback;
 - Comments on the PT/ILC activities where applicable;

Comments on competence as determined through conformity included in the assessment report shall be adequate to support the conclusions arising from the assessment.

the scope assessed and shall identify nonconformities, if any, to be resolved in order to conform to all of the requirements for accreditation.

The team's observations on areas for possible improvement may also be presented to the conformity assessment body but shall not recommend specific solutions.



The assessment Report PAC-F-24 prepared by the Team Leader will be provided to the CAB through PAC within one week after the closing meeting.

If this report on the outcome of the assessment differs from the outcome delivered at the closing meeting. PAC will provide an explanation to the assessed conformity assessment body, in writing

Any matters that need to be reported to PAC can be done by recording the matter on PAC-F-22“Feedback from Assessment”.

6.7.19 Nonconformities

During the pre-closing meeting, as a team, you will need to evaluate the significance of each finding and decide whether it must be converted into nonconformity.

The rules described in PAC-G-03 Guidelines for Addressing and Clearing Nonconformities will assist you in making that decision and correctly classifying the nonconformities when a finding casts doubt on the CAB's ability to meet the PAC accreditation criteria, the finding must be converted into a nonconformity. This will include but not be limited to non-compliance related to:

- Any of the PAC accreditation criteria, the relevant PAC Requirements or Technical Requirements;
- Any of the requirements of the relevant accreditation standard (i.e., ISO/IEC 17025, ISO/IEC 17020 and ISO 15189); or
- The CAB's own documented management system. If however, a CAB is in the process of transforming to a new standard, the finding does not need to be converted into nonconformity during the transition stage and can remain as an observation. This observation must be followed up at the next assessment and if still the case, it must then only be converted to a nonconformity.

6.7.20 Assessment Recommendations

For each type of assessment, there are different recommendations that can be made. The Technical Assessor need to be sure to assist the Team Leader in making the correct recommendations by following the conditions for each recommendation as described PAC-PR-10 Accreditation Decision Making Process **9.22**.

6.7.21 The Closing Meeting

Following the pre-closing meeting, the assessment team and relevant CAB staff gather for the closing meeting. The purpose of this meeting is to present a summary of the findings of the assessment team to the representatives of the facility and to allow discussion of the findings.

The Team Leader will conduct the meeting following PAC-F-23 “On site Assessment Closing Meeting Agenda”.



The Technical Assessor will normally be asked to present the nonconformities that he raised. You will do by reading out the nonconformities clearly and as they have been documented. You may explain the circumstances and justification for each.

The assessed body signs a printed version of the nonconformities forms recorded during the assessment for receipt and the assessor/expert sends this signed version to PAC accreditation Manager. Copies of these forms are kept by the assessed CAB.

6.8 AFTER THE ASSESSMENT

6.8.1 CAB Responsibility

Whenever nonconformities have been identified during the assessment, the CAB needs to take corrective action to rectify the problem. The corrective action taken will be documented by the CAB on PAC-F-14. The completed PAC-F-14, together with evidence of implementation of the corrective action will need to be submitted to the PAC office, within the time-period as specified during the closing meeting and on the Recommendation Report PAC-F-24. Refer to PAC-G-03 Guidelines for Addressing and Clearing Nonconformities

6.8.2 Communication

All communication to CAB must be directed through the PAC office.

6.8.3 Clearing the nonconformities

6.8.3.1 The nature and magnitude of the nonconformities determines the type of verification needed to clear the nonconformities which means:

- a) In the simplest case, submission of documented evidence of corrective action taken; or
- b) In a serious situation, an on-site “clearance of findings” (COF) visit may be required within 2 months of the assessment for the assessors to verify implementation of the corrective actions. This visit will be specifically to examine the areas of concern as disclosed in the

previous assessment. However, in some rare situations (e.g. where the CAB has been suspended) the range of condition(s) is so great that a complete re-assessment is required.

As soon as the CAB submits their corrective actions to the PAC office, you will be sent the corrective actions and supporting evidence for all the nonconformities that you have raised at the assessment.

You will need to review:

- The adequacy and appropriateness of each corrective action; and
- Whether sufficient evidence of effective implementation of the corrective action has been provided.

If you are satisfied with the corrective action and supporting evidence, the nonconformity can be signed off as cleared and dated.



Should you not be satisfied with the corrective action and/or supporting evidence, the PAC office must be informed of what is not acceptable or what information is lacking. The additional information required will be requested from the CAB and sent to you once received.

All the signed PAC-F-14 reports must be submitted back to the PAC office, within 5 working days of you receiving them.

6.9 ASSESSMENT TECHNIQUES

6.9.1 Throughout the assessment the team members should be aware of the two main objectives of their visit to the CAB:

- a) To determine whether the CAB's operations and facilities comply with the accreditation criteria; and
- b) To determine the extent of demonstrated competence.

During the time allocated for the assessment, the assessors must:

- a) Gather all the information about the CAB as efficiently and effectively as possible;
- b) Constantly evaluate findings against the CAB's documented management system (i.e. against its policies, operational procedures, methods, etc.) and the PAC accreditation requirements;
- c) Identify through objective evidence any breakdown in the technical system or departures from operating procedures;
- d) Be thorough and objective at all times.

6.9.2 The important tools used to gather information effectively, efficiently and thoroughly are by:

- Asking questions;
- Listening to the answers;
- Witnessing activities;
- Examining facilities; and
- Reviewing records.

6.9.2.1 Asking questions

Questions should always be asked on the basis of the organization's own management system, the PAC accreditation requirements and the relative technical practices. Answers provided must be verified against records (objective evidence) to demonstrate that the management system and technical competence aspects are maintained to ensure validity of the results. Hypothetical questions can be used to establish understanding beyond the existing situation and action that can be taken in the event of deviations.

6.9.2.2 Listening

Asking the right question is just the start of the information gathering process. It is only when the answer begins that the information starts flowing back to us. If we are not listening carefully, we are going to miss some of it



6.9.2.3 Witnessing activities

You will obtain a great deal of information from the questions you ask and the answers you receive. However, what is documented in the procedures or told to you may not be occurring in practice. This may be because:

The answers given to you may not be the truth. Deliberate deception happens occasionally but not very often. Honest misunderstandings are far more common than deliberate deception;

There may be special variants of procedures which have not been documented in the manual and were not elicited during the discussions;

Unknown to the supervisors, staff may not be following the standard procedures through carelessness, ignorance or inadequacies in the system or the resources available to them.

In addition, there will be aspects of the implementation of the management system and the procedures which cannot be explored by discussion and can only be established by examination.

Witnessing activities will help assessors to:

- a) See whether or not prescribed procedures are being followed;
- b) Determine whether or not staff have the skills required to perform tasks;
- c) Evaluate the effectiveness of the training and supervision provided;
- d) Evaluate adequacy of resources available;
- e) Detect defects in the equipment, for example, equipment instability; and
- f) Confirm the answers to questions asked earlier.

6.9.2.4 Examining facility

Observing the normal routine work of the CAB is better than witnessing a special demonstration. Seeing people working at their normal tasks and undertaking ongoing activities will enable you to appraise the real standard of a CAB's operation. Work not being performed can be discussed in the hypothetical sense. It is also possible to arrange the performance of a test or inspection by requesting this prior to the assessment. This should be discussed with the PAC Team Leader.

6.9.3 Assessment techniques guidelines

The following guidelines should assist you in a standardized approach to the assessment techniques.

a) How to establish that procedures are being correctly and fully implemented?

- Question management and staff who have an involvement in or bearing on the quality of the work;
- Examine records;
- Examine the suitability, maintenance, calibration, control and use of equipment, where applicable; and



- Examine the arrangements for exercising control over subcontractors and suppliers.

b) How to establish the technical competence of personnel in the scope of work covered by the schedule of accreditation?

- Examine the records outlined above;
- Have discussions with staff, supervisors and managers to evaluate their knowledge and understanding of the work performed;
- Witness the performance of staff while they perform calibrations/tests/inspections/ verifications/certifications, etc., as the case may be; and
- Assess the reports/results issued by the CAB.

c) How to conduct a witnessing assessment?

While witnessing an assessment, your role is first to observe; you may not influence the work being performed. You must be looking to see that as a minimum:

- The personnel member has performed the activity competently;
- The personnel member's competence is consistent with his/her records (i.e. training and competency records are in place and are up to date);
- The personnel member has access to all necessary documented methods and procedures;
- The procedures are up-to-date;
- The personnel member has implemented the procedures in full and correctly, i.e. no short cuts, no personalized application where it is not permissible to do so;
- The personnel member records all observations as required by the procedure;
- The records clearly identify what has been calibrated/tested/inspected/verified/certified, as the case may be;
- The method/procedure/equipment used is recorded as at the date and time (as required by the procedure);
- All records and raw data are signed/initialed/stamped and are traceable as applicable;
- Reports/certificates comply with the CAB's, PAC' and relevant accreditation standards' requirements;
- Facilities and equipment used are fit for accreditation purposes.

All the relevant sections of the PAC witnessing form PAC-F-18, as included in the assessment pack must be completed comprehensively and in detail. The witnessing form provides guidance as to the type of information that must be captured. This may differ according to the specific standard.

Note: If a CAB cannot provide witnessing on the day of the assessment, you may consider a “talk through” of the process.

d) How to conduct a vertical assessment?

A vertical assessment is an assessment of work previously done (prior to the PAC assessment) and where results/reports/certificates have already been issued by the CAB.



This type of assessment is done to confirm that all processes involved in the performance of an activity were done competently and complied with all the requirements of the applicable accreditation standard and the CAB's documented policies and procedures. In other words, it is an audit trail of past events.

During the vertical assessment you need to request a final report/result/certificate of work already performed prior to the assessment. The standard-specific vertical assessment form will guide you as to the aspects you need to verify at the specific time the activity was performed.

All the relevant sections of the PAC vertical assessment form PAC-F-20, as included in the assessment pack must be completed comprehensively and in detail.

Note: If a CAB cannot provide simulations and/or sufficient supporting evidence in order for a vertical assessment to be conducted, the Team Leader must be informed of this as soon as possible. The Team Leader, in consultation with the PAC Program Coordinator will decide on the course of action to be taken, which can include a decision to abandon the assessment.

6.10 MAINTAINING A PROFESSIONAL APPROACH

Throughout the assessment, it is important to maintain a professional approach by paying attention to the following important aspects:

Project the right image

One of the most valuable tactics for Assessors/Experts to employ is to project a professional image of him/herself and that of PAC.

To project the right image you need to ensure that:

- a) You look at the part of a smart tidy appearance which creates a favorable impression and boosts self-confidence. You need to smile and be approachable;
- b) You remain calm, self-controlled and courteous. You do not become flustered, emotional, argumentative, or dogmatic. "Please" and "Thank you" are amongst the most powerful words in an assessor's vocabulary;
- c) You are precise and do not use loosely phrased questions or requests which cause confusion and waste of time; and
- d) You have been prepared for the assessment which projects a professional image.

6.10.1.1 Stay on track

To maintain a professional approach, it is important that you stay on track during the assessment by:

- a) Avoiding diversions, however interesting;



- b) Following your plan (as far as possible);
- c) Managing your time; and
- d) Keeping control of your part of the assessment.

6.10.1.2 Keep the Assessment Flowing

It is important to keep the assessment flowing by:

- a) Examining a systematic sequence of activities;
- b) Avoiding back-tracking unnecessarily;
- c) Maintaining an orderly flow of questions;
- d) Avoiding long unnecessary periods of silence; and
- e) Projecting quiet confidence.

6.10.1.3 Deal with Tension

An assessment is a stressful experience for staff at every level in the organisation. Pride, reputation and status are all at stake and some people may even feel that their jobs are at risk. Most of us do not look forward to examinations of any kind. These factors can lead to an assessment being a time of tension.

Tension can be reduced in an assessment situation by:

- a) Being human;
- b) Putting people at ease;
- c) Projecting an appropriate image; and
- d) Recognizing your own tension.

Tension during an assessment can lead to:

- a) Defensive responses;
- b) Reluctant communication;
- c) Occasional aggression; and
- d) Poor performance

6.10.1.4 Teamwork

A spirit of teamwork is essential. During an assessment, teamwork involves a common purpose amongst all the team members. It involves a mutual understanding of team roles and a willingness to surrender individually to the team unit.



To work as a Team

- Support one another;
- Do not interrupt one another;
- Do not undermine anyone in the team; and
- Respect each team members' approach.

Be aware of the other team member's needs by allowing time for:

- Everyone to collect their thoughts;
- Clarifying questions; and
- Technical support.

If you disagree

- Avoid Conflict or arguing with the CAB personnel.

If the Technical Assessor disagrees with a comment or suggestion made by another team member or the Team Leader, be sure you:

- Establish whether or not the issue is important enough to be raised;
- Determine whether or not it can wait and be raised at another time;
- In consultation with the Team Leader, call a team meeting if necessary; and
- Never have an argument with a fellow team member or the Team Leader in front of others.

6.11 ASSESSMENT TACTICS

The following are assessment tactics:

Always be fair, flexible and prepared to listen and to reason - Make allowances, consider the circumstances surrounding each nonconformity and do not expect unreasonable levels of diligence or reliability from the CAB's staff.

Be sensitive - Put staff at their ease. Do not be afraid to admit that you also make mistakes occasionally. Be helpful and constructive at all times.

Be factual - Verify findings. Be aware of producing findings which rely on opinion, whether they be your own or those of the CAB.

Be decisive - Once you have gathered objective evidence to form the basis of judgement, there is no point in going over the same ground again.

Bear in mind staff sensitivities - Do not criticize staff in front of their subordinates or their seniors.



It is important to discuss findings on the spot. Do not make notes of nonconformities without discussing the matter fully with CAB's staff.

Be aware of time - If time begins to run short it is better to concentrate on the vital aspects of the CAB's operations.

Avoid too many escorts as this slows down the assessment.

6.12 AVOID TACTICS OF THE CONFORMITY ASSESSMENT BODY

The following tactics are occasionally adopted by CAB staff, sometimes deliberately or unwittingly, under stress:

Long lunch breaks - The CAB's staff may arrange to take the assessment team to lunch. If this is a restaurant some distance from the CAB, this can be time wasting. Lunch at the CAB premises is preferable.

Interruptions - The CAB's staff may be constantly interrupted during the assessment to take phone calls or attend to queries, etc. In such circumstances, ask politely if such interruptions can be minimized.

Tour of CAB - Some CABs may offer to take the assessment team on a lengthy tour of the CAB. Such tours should be politely declined.

6.13 ASSESSMENT PACK

After the assessment, the Team Leader shall submit the CAB assessment report - PAC-F-24, nonconformities report - PAC-F-14 and relevant duly completed checklists/forms to PAC within one week after the assessment.

PAC File Manager shall check the content of the assessment report and seek clarification with the Team Leader if there is an omission/misunderstanding.

6.14 ASSESSOR ETHICS AND RULES

As an Assessor, you are a representative of PAC. It is therefore important for you to act, look and work in a professional manner that represents PAC in a positive and professional light.

Dress - Dressing for an assessment must be neat and professional. Clothes like Jeans, tracksuits, T-shirts and other informal wear may not be worn. You are required to wear the relevant protective clothing appropriate to the area assessed, however, this is normally provided by the CAB being assessed. Should you bring along your own protective clothing it may not display any other company's name or logo. Names/logos of other companies shall be shielded or obscured to avoid questions or doubt about your interests.

Politeness - Be polite and act in a professional manner at all times. Never get into heated debate on any issue and refer any disputes to the Team Leader.



Pennsylvania Accreditation Center

PAC Assessors Guidance Handbook

PAC-G-01

Ver 1.0: 6/2021

Cell phones - The use of cell phones during the assessment is strictly prohibited as this distracts both the assessor and the staff being assessed. The Team Leader may however use his/her cell phone to consult with the PAC Office during the assessment, on condition that this is done privately. Any urgent calls can be made during tea or lunch breaks.

Consulting - Under no circumstance can an Assessor/Technical Expert advise, teach, give opinions or consult on any issues with the CAB and/or the staff before, during or after the assessment. You may not accept an assessment if you have worked for or consulted with the CAB you have been asked to assess within 2 years before the assessment date.

Gifts and Meals – No gifts shall be accepted from PAC clients. The acceptance of dining invitations can be an area of concern. The following guidance may assist you with situations that might arise in the course of participating in assessments.

Soliciting for Business - Assessors/Technical Experts are strongly discouraged from soliciting for private consultancy business during or after the assessment. An Assessor/Technical Expert shall therefore not market himself/herself for gaining work or misuse his/her position while interacting with PAC clients. Business cards or private contact details shall not be exchanged during or after the assessment.

Any dining invitation or gifts offered while participating in an assessment should be viewed as hospitality token. However, they are not an obligation of the accreditation assessment process. Under no circumstance should gifts and meals ever be suggested to or expected of an organization.

The provision of lunch by the CAB is an acceptable time and cost-effective business practice. Occasionally company souvenirs are given e.g. corporate mugs, caps, etc. and when travelling locally or out of the country evening meals may be offered. If provided they are not excessive in value, these are acceptable.

Small gifts may be given at the conclusion of an assessment as a token of appreciation for your time and effort. Often CAB staff will offer to take you for evening meals or on local guided tours in spare time as a measure of hospitality and to allow you to experience more fully the richness of the local culture. Once again, provided these are not excessive in value they are in keeping with local business practices and thus acceptable.

It is up to you as individuals to make appropriate judgment when accepting or declining any gifts or dining invitations. Common sense and awareness of usual business practice within the culture is the best guide. If you are in any way uncomfortable, discuss it with the PAC Technical Manager/Program Coordinator or gracefully decline. Any monetary gifts may not be accepted. The receipt of all gifts must be disclosed to PAC.

6.15 OTHER REQUIREMENTS

Assessors/Experts are required to continuously update their information.



You must ensure that you provide to PAC the following information for inclusion into your “Assessor file”, and that the file is kept up to date with all the required information:

- a. A copy of your qualifications in the field of expertise in which you carry out assessments;
- b. A current dated Curriculum Vitae (CV), an update of which is required at least once a year, and which must include:
 - i. Your name and address;
 - ii. Organization of Employment and position within the organization;
 - iii. Education and professional status;
 - iv. Work experience; and
 - v. Training in management system and assessment and conformity assessment activities.

6.16 ASSESSOR CONCLAVES

Every two (2) years assessors will be invited to attend the mandatory Assessor Conclave. Your attendance is important as we use these conclaves to transfer information regarding PAC, its developments, changes, new or revised accreditation requirements and to standardize assessors’ approach to the assessment process.

6.17 ASSESSOR MONITORING

At least once in every three (3) years, PAC need to monitor your performance during an assessment to ensure consistent interpretation and application of the relevant Standards used and to stay active and up-to-date with PAC assessment methodology.



Pennsylvania Accreditation Center

PAC Assessors Guidance Handbook

PAC-G-01

Ver 1.0: 6/2021

7 RELATED FORMS

No	Name	Code
1	application form for accreditation	PAC-F-08
2	Resource review form	PAC-F-10
3	Acceptance of Assessment Team Form	PAC-F-11
4	Document Review Report for Laboratories - ISO-IEC 17025	PAC-F-12
5	Preliminary Visit Report for Laboratories	PAC-F-13
6	Nonconformity form	PAC-F-14
7	Assessment Plan	PAC-F-15
8	Onsite Assessment - Opening Meeting Agenda	PAC-F-16
9	Check-list [ISO/IEC 17025:2017]	PAC-F-17
10	Checklist 17021-1-2015	PAC F-17-1
11	Witnessing of Activity for Labs	PAC-F-18
12	Witnessing-MSCB	PAC F-18-1
13	On-site Evaluation of a Calibration Laboratory	PAC-F-19
14	Vertical Assessment Laboratories IEC 17025-2017	PAC-F-20
15	Feedback from assessment	PAC-F-22
16	Onsite Assessment - Closing Meeting Agenda	PAC-F-23
17	CAB Assessment Report	PAC-F-24
18	Assessment Matrix (Program) Form	PAC-F-25
19	Declaration of Impartiality and Confidentiality	PAC-F-45